

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	<i>62861</i>	<i>1/10</i>
O.I.P.E. CLASSIFIER	<i>[Signature]</i>	<i>62861</i>	<i>1/27/00</i>
FORMALITY REVIEW		<i>62861</i>	<i>2-11-00</i>
RESPONSE FORMALITY REVIEW		<i>62861</i>	<i>9-22-00</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

BEST AVAILABLE COPY

Claim	Final	Original	Date
1	✓	✓	1/10/02
2	✓	✓	1/10/02
3	✓	✓	1/10/02
4	✓	✓	1/10/02
5	✓	✓	1/10/02
6	✓	✓	1/10/02
7	✓	✓	1/10/02
8	✓	✓	1/10/02
9	✓	✓	1/10/02
10	✓	✓	1/10/02
11	✓	✓	1/10/02
12	✓	✓	1/10/02
13	✓	✓	1/10/02
14	✓	✓	1/10/02
15	✓	✓	1/10/02
16	✓	✓	1/10/02
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25	✓	✓	1/10/02
26	✓	✓	1/10/02
27	✓	✓	1/10/02
28	✓	✓	1/10/02
29	✓	✓	1/10/02
30	✓	✓	1/10/02
31	✓	✓	1/10/02
32	✓	✓	1/10/02
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46	✓	✓	1/10/02
47	✓	✓	1/10/02
48	✓	✓	1/10/02
49	✓	✓	1/10/02
50	✓	✓	1/10/02

Claim	Final	Original	Date
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If more than 150 claims or 10 actions
 staple additional sheet h r

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